

This record is a partial extract of the original cable. The full text of the original cable is not available.

UNCLAS SECTION 01 OF 03 HANOI 000302

SIPDIS

SENSITIVE BUT UNCLASSIFIED

FOR CA/OCS/ACS/EAP; EAP/EX; EAP/BCLTV
BANGKOK FOR RMO, CDC, AID (TDOLAN)
STATE PASS HHS
USDA FOR FAS/PASS TO APHIS

E.O. 12958: N/A

TAGS: [AMED](#) [AMGT](#) [CASC](#) [EAGR](#) [TBIO](#) [VM](#) [AFLU](#)

SUBJECT: VIETNAM - AVIAN FLU UPDATE #5

CURRENT STATUS

11. (U) The number of suspected cases of avian influenza in humans in Vietnam continues to increase. 10 have now been confirmed as H5N1 in the laboratory. (Yesterday, we mistakenly reported a total of 12.) The number of affected provinces has further increased to 52 out of a total of 64 provinces. According to the FAO here, approximately 8 million birds have been "culled", representing 3.2 percent of the chickens in Vietnam. It is unclear if this figure represents true culling, or just disposal of birds that have died. WHO has appealed again for urgent donor assistance in the form of protective suits and equipment to carry out increased culling.

WHO/FAO BRIEFING FOR AMBASSADORS

12. (U) At the EU's invitation, the WHO and FAO gave a briefing for Ambassadors on February 3. The briefing began with a technical presentation by Dr. Peter Horby of the WHO, who described the general characteristics of human and avian influenza.

13. (U) Looking more specifically at Vietnam's outbreak, Dr. Horby showed a chart of the affected provinces. The outbreak appeared to be concentrated in the northern and southern provinces, with only a few central provinces reporting cases. (We may actually be seeing a lack of reporting rather than a lack of cases in the central provinces.) Horby pointed out a number of other anomalies in this outbreak that are puzzling scientists. There are many more cases among children. The disease appears to have high rates of fatality in Vietnam. Finally, none of the 1000 Vietnamese doing the chicken culling has gotten sick even though most are not wearing PPE.

WHAT TO DO?

14. (U) WHO recommendations: Dr. Horby then focused on next steps in Vietnam. WHO said that it would concentrate efforts on: containing the outbreak in animals (through surveillance, culling, quarantine, and restricted movement of poultry); protecting people (through education, PPE for cullers, infection control in hospitals, and early diagnosis); improving early detection of human cases (through improving laboratory capacities and capabilities); characterizing the structure of the virus (to help examine possibilities for human-to-human spread and the development of vaccine); and development of a vaccine.

15. (U) WHO recommendations to individuals: As for current advice to individuals in Vietnam, Horby's advice was the same that has been available through WHO, CDC, and MED - avoid high-risk areas, practice good hygiene, etc. Horby did reiterate that for now WHO recommends no travel restrictions. He reiterated that Tamiflu is useful in early treatment, and has usefulness as prophylaxis. A vaccine particular to the H5N1 strain of avian influenza is likely 6-8 months from development of even a limited supply.

WHO Urges More Activism by GVN

16. (U) WHO/FAO activities: WHO and FAO have been encouraging the GVN to take a more aggressive approach to control infection in birds (through more aggressive culling) and to detect human cases (through improved surveillance). WHO Vietnam Director Pascale Brudon told the Ambassadors, "We should all continue to push the Government of Vietnam to act because more needs to be done." Vietnam has now established a GVN working group, and WHO has encouraged Deputy Prime Minister Pham Gia Khiem to chair it himself.

17. (U) WHO and FAO are developing training programs for cullers and educational materials for provincial level veterinary officials and farmers. FAO Vietnam representative Anton Rychener informed the Ambassadors that FAO had just provided a grant of \$400,000 for training support in Vietnam. WHO has been working to increase the capacity and capabilities of laboratories in Vietnam. Finally, at the GVN request, additional WHO clinicians will arrive shortly to assist with case management. Both WHO and FAO continued the appeal for additional PPE.

18. (U) In answering questions about the spread of the disease from province-to-province, both Rychener and Brudon stated that, while the GVN has ordered the suspension of all movement of poultry, the fact remains that enforcement is not taking place effectively, and poultry is being transported from city to city and province to province.

19. (U) WHO addressed the question of human-to-human transmission by stressing that we will probably never be able to confirm the method of transmission in the well-publicized Vietnamese cases in Thai Binh. Human-to-human transmission remains one of a number of possibilities. Brudon said that WHO expects to see limited human-to-human transmission within families for sure, but that this does not necessarily mean there will be a community spread or pandemic.

FAO COMMENTS

10. (SBU) In response to questions, FOA's Rychener was clearly pessimistic. He stated that the avian flu outbreak here "has brutally uncovered the inefficiency of the Agriculture Extension Service in Vietnam," which he said lacks motivation, funding, and transportation. Personnel in the Extension Service are not willing or empowered to take personal initiative or make decisions. The poor state of affairs at the Ag Service, he observed, makes it difficult for the GVN to deal with the current threat quickly or effectively.

11. (U) WHO tempered the FAO comments. While agreeing that the problem will not go away soon and that "today there is a vacuum in what needs to be done", Brudon stated that the Government of Vietnam is moving forward in developing a strategy, but added that it needs to do so more quickly.

DONOR COORDINATION

12. (U) The Japanese Embassy representative raised the question of coordination among donors. WHO acknowledged the need for greater coordination of donations and promised to work with the World Bank to develop an effective way to coordinate donor assistance. Brudon did encourage those donating equipment to work directly with the GVN, and to simply keep WHO informed.

SEPARATE MEETING WITH HCMC DEPARTMENT OF HEALTH

13. (U) IN HO CHI MINH CITY, THREE REPRESENTATIVES OF THE CONSULAR CORPS (FRENCH, CHINESE, AND U.S.) RECEIVED A BRIEFING FROM DR. NGUYEN THE DUNG, DIRECTOR OF THE HCMC DEPARTMENT OF HEALTH. DR. DUNG STRESSED THAT THERE WAS STILL NO CONFIRMED CASE OF HUMAN-TO-HUMAN TRANSMISSION. HCMC MEDICAL PERSONNEL CONTINUED TO MONITOR VETERINARIANS, FARM WORKERS, AND FAMILY MEMBERS WHO ARE INVOLVED IN CULLING POULTRY. THEY ARE ALSO MONITORING THE FAMILIES OF ALL THE SUSPECTED AVIAN FLU PATIENTS. THE INSTITUTE OF TROPICAL MEDICINE, CHO RAY HOSPITAL, AND PEDIATRIC HOSPITALS #1 AND #2 HAVE BEEN DESIGNATED AS RECEIVING HOSPITALS FOR SUSPECTED AVIAN FLU PATIENTS.

14. (U) Dr. Dung said it was the city's policy to cull/kill all poultry, whether sick or healthy. But as a matter of practicality, HCMC authorities have focused on large chicken farms first, so Dr. Dung emphasized that the percentages and numbers we see about how many chickens have been culled refers only to the percentage of those on large chicken farms. He acknowledged that the city could not control small family holdings or pet birds. Pet bird sales have been prohibited by the city, but police authority varies from district to district, so there is no consistent enforcement of the ban, nor of culling small family chicken holdings. He passed out a Vietnamese public information flyer which states: "Don't eat them. Don't raise them. Don't transport them."

15. (U) As for provincial coordination, Dr. Dung said there was a meeting with the Ministry of Health scheduled for tomorrow, where it was expected all provinces and cities

would be instructed to coordinate their actions. He acknowledged there were different attitudes among the provinces, but they had to wait for a directive from the central government before initiating cooperation. Even HCMC was not coordinating its culling and public health information with its neighboring provinces. (Post Note: HCMC and the three surrounding provinces of Binh Duong, Dong Nai, and Ba Ria-Vung Tau are host to many American and foreign-invested factories, and the work populations of these provinces travel back and forth daily.)
BURGHARDT